

**SUPPLEMENTAL AMENDMENT  
GROUP ART UNIT 2162  
PATENT  
DOCKET NO. 1352-2**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**APPLICANT:** Silas W. Dunsmore et al.

**EXAMINER:** Dennis V. Myint

**SERIAL NO.:** 10/608,722

**GROUP ART UNIT:** 2162

**FILED:** June 26, 2003

**DATED:** November 6, 2006

**FOR: METHOD AND APPARATUS FOR EXCHANGING SUB-  
HIERARCHICAL STRUCTURES WITHIN A HIERARCHICAL  
FILESYSTEM**

Mail Stop: Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT TRANSMITTAL FORM**

Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established.

☐ A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.

☒ No additional fee is required.

The fee has been calculated as shown below:

|  | (Col. 1)<br>CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | (Col. 2)<br>HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | (Col. 3)<br>PRESENT<br>EXTRA | SMALL ENTITY<br>ADDIT.<br>RATE FEE | OTHER THAN<br>SMALL ENTITY<br>OR RATE<br>ADDIT.<br>FEE |
|--|---|--|---|------------------------------|------------------------------------|--|
| TOTAL  | 54 MINUS  |  | 56  | = 0                          | X 25 \$                            | X 50 \$ 0  |
| INDEP.   | 6 MINUS   |  | 6   | = 0                          | X 100 \$                           | X 200 \$ 0   |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |   |  |   |                              | X 180 \$                           | X 360 \$ 0   |
|  |   |  |   |                              | TOTAL \$                           | OR TOTAL \$  |
|  |   |  |   |                              | ADDIT. FEE \$                      |  |

\* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge Deposit Account No. 50-2140 in the amount of \$ \_\_\_\_\_. Two (2) copies of this sheet are enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ is enclosed.
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-2140. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-2140 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



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REF/JRN:mg